

FEE AUTHORIZATION / AMENDMENT TRANSMITTAL LETTER

Attorney's Docket No:
S-210C

Serial No. 08/259,413	Filing Date June 14, 1994	Examiner H. Lilling	Group Art Unit 1808
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In Re Application of

Kohn, et al.

For

PEGYLATION REAGENTS AND COMPOUNDS FORMED THEREWITH

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

- ☒ Applicant(s) request(s) the following extension of time under 37 C.F.R. 1.136(a):
- ☐ One month of original due date (\$110.00)
- ☐ Two months of original due date (\$400.00)
- ☒ Three months of original due date (\$950.00)
- ☐ Four months of original due date (\$1,510.00)
- ☐ Five months of original due date (\$2,060.00)
- ☒ A response in connection with the matter for which this extension is requested:
- ☒ is filed herewith.
- ☐ has been filed.
- ☐ The response is the filing of a continuing prosecution application having an express abandonment conditioned on the granting of a filing date to the continuing application.
- ☒ The accompanying papers include amended claims for which no additional fee is required.
- ☐ The accompanying papers include amended claims the fee for which has been calculated as follows:

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of extra claims present	(6) Rate	(7) Additional Fee
Total Claims	*	Minus	**	=	x \$22	=
Indep. Claims	*	Minus	***	=	x \$82	=
<input type="checkbox"/> First Appearance of a multiple dependent claim					+\$270	=

Total Additional Fee for this Amendment

*If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ The following other fees are incurred by the accompanying papers.☐ Other: _____

Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$950.00.

A duplicate copy of this petition is attached.☒ If an additional extension of time is required, please consider this a request therefore.☒ The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.Please Send Future Correspondence To:

U.S. Patent Operations/TDZ

Dept. 430, M/S 27-4-A

AMGEN INC.

One Amgen Center Drive

Thousand Oaks, California 91320-1799

Thomas D. Zindrick

Attorney/Agent for Applicant(s)

Registration No.: 32,185

Phone: (805) 447-8101

Date: December 1, 1998

CERTIFICATE OF MAILING

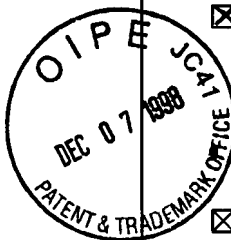
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231, on the date appearing below.

December 1, 1998

Date

Ronda G. Spahr

RONDA G. SPAHR



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